

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) (Name, State Bar number, and address): <div style="display: flex; justify-content: space-between;"> <div> TELEPHONE NO.: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): </div> <div> FAX NO. (Optional): </div> </div>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
RESPONSE TO NOTICE OF MOTION TO SET ASIDE JUDGMENT OF PATERNITY	
HEARING DATE: TIME: DEPT., ROOM, OR DIVISION:	CASE NUMBER:

1. My position on the facts regarding paternity as alleged in the motion to set aside the judgment and voluntary declaration of paternity, if a declaration was filed regarding the following children, is:

	<u>Name of child</u>		<u>Date of birth</u>
a.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
b.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
c.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
d.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
e.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
f.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
g.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
h.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
i.	<input type="checkbox"/> Additional children are listed on a page attached to this response.		

2. My position on genetic testing of each of the following children is:

	<u>Name of child</u>		<u>Date of birth</u>
a.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
b.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
c.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
d.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
e.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
f.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
g.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
h.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
i.	<input type="checkbox"/> Additional children are listed on a page attached to this response.		

3. I ☐ agree ☐ disagree with the request to appoint a guardian ad litem for each of the children subject to this request.

4. ☐ The motion is not complete because (specify):

5. ☐ The motion is not timely because (specify):

6. ☐ The motion is not proper because (specify):

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	

7. ☐ The facts in support of this response are:
- a. ☐ The paternity judgment resulted from a marital dissolution, legal separation, or nullity action.
 - b. ☐ The marriage presumption contained in Family Code section 7540 applies.
 - c. ☐ The paternity judgment was not issued in California.
 - d. ☐ There is another California judgment of paternity in a different case for the same previously established father and child.
 - e. ☐ There is a voluntary declaration of paternity, and there is no basis to set it aside.
 - f. ☐ Genetic tests were conducted before the judgment that indicated the previously established father is the biological father of the child.
 - g. ☐ The paternity judgment is based on an adoption.
 - h. ☐ The child was conceived by artificial insemination, and the paternity judgment is based on Family Code section 7613.
 - i. ☐ The child was conceived under a surrogacy agreement.
 - j. ☐ The motion is not in the best interest of the child because (*specify*):

 - k. ☐ Other (*specify*):

☐ Contained in the attached declaration.

8. Number of pages attached: _____

I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> (TYPE OR PRINT NAME)		<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> (SIGNATURE OF DECLARANT)
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1. I am at least 18 years of age, not a party to this case, and a resident of, or an employee in, the county where the mailing took place.
2. My residence or business address is (*specify*):
3. I served a copy of this response by enclosing it in a sealed envelope with first-class postage fully prepaid and depositing it in the United States mail as follows:
 - a. Date of deposit:
 - b. Addressed as follows:
 - c. Place of deposit (*city and state*):

Date: _____

_____ (TYPE OR PRINT NAME)  _____ (SIGNATURE OF DECLARANT)